

STAPLE AREA (for additional cross reference)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim		Date
Final	Original	
1	22/10/06	
2	N	
3	N	
4	N	
5	N	
6	N	
7	N	
8	N	
9	N	
10	N	
11	N	
12	N	
13	N	
14	N	
15	N	
16	N	
17	✓	
18	✓	
19	✓	
20	✓	
21	✓	
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48	✓	
49	✓	
50	✓	

Claim		Date
Final	Original	
51	✓	
52	✓	
53	✓	
54	✓	
55	✓	
56	✓	
57	✓	
58	✓	
59	N	
60	N	
61	N	
62	N	
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Claim		Date
Final	Original	
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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